

# St. Paul's RE and Youth Registration Form 2017-2018

ONE FORM PER FAMILY - *Please Complete Both Sides and PRINT CLEARLY!*

- The Registration Form must be filled out completely and the Payment included.
- A copy of the child's Baptism Certificate must also be included for all children and youth preparing for First Reconciliation, First Eucharist and Confirmation.

Family Last Name \_\_\_\_\_ Contact Phone \_\_\_\_\_ Registered at St. Paul's? \_\_\_\_\_

Address \_\_\_\_\_ City \_\_\_\_\_ Zip \_\_\_\_\_

## Parent/Guardian & Emergency Contact Information (Youth information on other side)

Parent/Guardian First/Last Name	Relationship to Child(ren)	E-mail Address	Home Phone	Cell Phone
Emergency Contact	Relationship to Child(ren)	E-mail Address	Home Phone	Cell Phone

## Parish Family Agreement (Please read and sign) Name of Parish registered at if not a St. Paul's member \_\_\_\_\_

Discipleship calls us to more than membership; it calls us to be active participants in our parish. We are called to recognize God's abundant blessings and our obligation to manage those wisely.

**ACTIVE PARISHIONER**

- Registered member of St. Paul's
- Regular Mass attendance on Sundays and Holy Days of Obligation at St. Paul's Parish.
- At least one adult member of the household is committed and active in at least one parish ministry.
- I reaffirm my commitment to be a good example through my actions. I ask the support of my parish in nurturing my faith as I strive to form my children as disciples through Catholic education. I pledge my cooperation with the parish and its ministries, and will make every effort to supervise my children's commitment as well.

Parent/Guardian Signature: \_\_\_\_\_ Date: \_\_\_\_\_

## Permission Release (Please read and sign)

- I do hereby give permission for my child(ren) to participate in St. Paul's Religious Education programs. I agree to hold the Diocese of Boise, St. Paul's parish, staff and volunteers free from liability for any illness or injury that might be incurred by my child(ren) during these events. Should any injury occur, I hereby give my permission for my child(ren) to receive treatment from a physician to be selected by a St. Paul's staff member if s/he is unable to reach me or my family physician.
- I understand that St. Paul's parish, staff and volunteers are not responsible for my child(ren)'s transportation to and from St. Paul's RE and Youth Ministry events. Nor is St. Paul's parish, staff, or volunteers responsible for my child(ren) should they leave the immediate area where the event is taking place or choose to stay after an event has taken place.
- I give St. Paul's permission to use photographs/videos which include my child(ren) in Parish related communications.

Parent/Guardian Signature: \_\_\_\_\_ Date: \_\_\_\_\_

**Volunteers are the heart and soul of the Faith Formation Programs. Your time and talents are needed!**

I am interested in volunteering for the following age group(circle preferences): Pre-K/K      Elementary      Jr. High      Sr. High      Confirmation Preparation

Name and e-mail address of volunteer: \_\_\_\_\_

**RE and Youth Class Sessions:**

<p><b>PreK4/K-5th</b>  <b>A</b> - Sunday (10:45 – 11:40 am)  <b>B</b> - Monday (6 – 7pm)  <b>C</b> - Wednesday ( 5:30 – 6:30 pm)</p> <p><b>FEE: \$35/child \$90/Family</b></p> <p><i>(Must be 4 &amp; 5 by Sept. 1<sup>st</sup> and potty trained.)</i></p>	<p><b>Jr. High: 6<sup>th</sup> – 8<sup>th</sup></b>  <b>D</b> - Wednesday          (6:30 - 8 pm)</p> <p><b>FEE: \$35/youth \$90/Family</b></p>	<p><b>High School :</b>  <b>9<sup>th</sup> – 12<sup>th</sup> grade</b>  <b>E</b> – Sunday (3:00-4:30)</p> <p><b>FEE: \$35/youth \$90/Family</b></p>	<p><b>Confirmation Prep</b>  <b>9<sup>th</sup> – 12<sup>th</sup> grade</b>  <b>F</b>- Sunday (3:00-4:30)</p> <p><b>FEE: \$35/youth \$90/Family</b></p>	<p style="text-align: center;"><b>Sacraments</b></p> <p><b>First Reconciliation/First Communion, &amp; RCIA for Elementary:</b>  <i>For children 1<sup>st</sup> – 5<sup>th</sup> grade. This is a 2 year program.</i>  <i>Contact: Marisela Linan, <a href="mailto:mlinan@stpaulsnampa.org">mlinan@stpaulsnampa.org</a></i></p> <p><b>First Communion, RCIA for Middle School:</b>  <i>For youth entering 6<sup>th</sup> – 8<sup>th</sup> grade. This is a 1 year program.</i>  <i>Contact: Stephanie Craig, <a href="mailto:scraig@stpaulsnampa.org">scraig@stpaulsnampa.org</a></i></p> <p><b>First Communion, Confirmation &amp; RCIA for High School:</b>  <i>For youth entering 9<sup>th</sup>- 12<sup>th</sup> grade. This is a 1 year program.</i>  <i>Confirmation prep runs from October through April. Contact: Mark Henry at <a href="mailto:mhenry@stpaulsnampa.org">mhenry@stpaulsnampa.org</a></i></p>
---	--	---	--	--

**Child/Youth Information:**

Please list Class Session code letter below:	First Name <i>(List additional children on another sheet of paper.)</i>	Last Name	M/F	Birth Date M/D/Y	Grade Fall, 2017	Check sacraments ALREADY RECEIVED			Check Sacraments RECEIVING THIS YEAR				
						Baptism (Catholic)	Eucharist	Confirmation	Baptism	Reconciliation	Eucharist	Confirmation	
Any medical conditions we need to be aware of? If yes please specify below													
Child/Youth:													
Child/Youth:													

**Registration Fees/Payment Information**  
 If a payment plan is needed, forms are available. Please contact the Finance Department in the Main Office and they will be happy to assist you.

Total \$ for children registering: Pre-K/K \_\_\_\_\_ + Elementary \_\_\_\_\_ + Jr. High \_\_\_\_\_ + Confirmation prep \_\_\_\_\_ + Sr. High Youth Ministry \_\_\_\_\_ = \$ \_\_\_\_\_ TOTAL AMOUNT DUE

**FEES: See fees above.**

\$ \_\_\_\_\_ TOTAL ENCLOSED

Payment (Enter Amount & Type of Payment): Cash \$ \_\_\_\_\_ Check (Made Out To St. Paul's) \$ \_\_\_\_\_ Credit Card: MC Visa Discover Amex (Please circle card type and use table below)

<b>OFFICE USE</b>	Date Rec'd _____
Amount Rec'd \$ _____	
CK# _____ CA CC Initial _____	
Payment Schedule Yes No	